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## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2001

Application or Docket Number

AB-1164

| CLAIMS AS FILED - PART I (Column 1) (Column 2)  |  |   |                                       |                                      |                                 |                  | SMALL ENTITY TYPE   |                        | OR     | OTHER THAN<br>OR SMALL ENTITY |                        |
|---|--|---|---------------------------------------|--------------------------------------|---------------------------------|------------------|---------------------|------------------------|--------|-------------------------------|------------------------|
| TOTAL CLAIMS  |  |   | 35                                    |                                      |                                 |                  | RATE                | FEE                    | 1      | RATE                          | FEE                    |
| FOR   |  |   | NUMBER FILED                          |                                      | NUMB                            | ER EXTRA         | BASIC FEE           | 370.00                 | OR     | BASIC FEE                     | 740.00                 |
| TOTAL CHARGEABLE CLAIMS   |  |   | 35 minus 20=                          |                                      | * 15                            |                  | X\$ 9=              |                        | OR     | X\$18=                        | 290                    |
| INDEPENDENT CLAIMS  |  |   | 川 minus 3 =                           |                                      | *                               |                  | X42=                |                        | OR     | X84=                          | ~8U                    |
| MU  | LTIPLE DEPEN                                   | NDENT CLAIM PE                            | RESENT                                |                                      |                                 |                  | +140=               |                        | OR     | +280=                         |                        |
| * If  | the difference                                 | in column 1 is                            | less than zero, enter "0" in column 2 |                                      |                                 | column 2         | TOTAL               |                        | OR     | TOTAL                         | 1094                   |
|   | С  |   | MENDE                                 | ENDED - PART II (Column 2) (Column 3 |                                 |                  | SMALL ENTITY        |                        |        | OTHER THAN  SMALL ENTITY      |                        |
|   | (Column 1) CLAIMS                              |   |                                       |                                      | HEST                            | (Column 3)       |                     | ADDI-                  | OR<br> | <b>U</b>                      | ADDI-                  |
| AMENDMENT A   |  | REMAINING<br>AFTER<br>AMENDMENT           |                                       | NUM<br>PREVI                         | MBER<br>IOUSLY<br>FOR           | PRESENT<br>EXTRA | RATE                | TIONAL<br>FEE          |        | RATE                          | TIONAL<br>FEE          |
|   | Total  | *   | Minus                                 | **                                   |                                 | =                | X\$ 9=              |                        | OR     | X\$18=                        |                        |
| AME   | Independent                                    | *   | Minus                                 |                                      |                                 | -                | X42=                |                        | OR     | X84=                          |                        |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM  |  |   |                                       |                                      |                                 |                  | +140=               |                        | OR     | +280=                         |                        |
| TOTAL   |  |   |                                       |                                      |                                 |                  |                     |                        | OR     | TOTAL                         |                        |
| ADDIT. FEE  |  |   |                                       |                                      |                                 |                  |                     |                        |        | ADDIT. FEE                    |                        |
|   |  | CLAIMS                                    |                                       |                                      | HEST                            | (Column 3)       |                     | ADDI                   |        |                               | A D D I                |
| AMENDMENT B   |  | REMAINING<br>AFTER<br>AMENDMENT           |                                       | NUM<br>PREVI                         | MBER<br>NOUSLY<br>D FOR         | PRESENT<br>EXTRA | RATE                | ADDI-<br>TIONAL<br>FEE |        | RATE                          | ADDI-<br>TIONAL<br>FEE |
|   | Total  | *   | Minus                                 | **                                   |                                 | =                | X\$ 9=              |                        | OR     | X\$18=                        |                        |
| AME   | Independent                                    | *<br>ENTATION OF MI                       | Minus                                 | ***                                  | T CLAIM                         | -                | X42=                |                        | OR     | X84=                          |                        |
|   | FINOTITIECE                                    | MAIONO                                    |                                       |                                      | 1 00                            |                  | +140=               |                        | OR     | +280=                         |                        |
|   |  |   |                                       |                                      |                                 |                  | TOTAL<br>ADDIT. FEE |                        | OR     | TOTAL<br>ADDIT. FEE           |                        |
|   |  | (Column 1)                                |                                       | (Colu                                | Jmn 2)                          | (Column 3)       | ADDII, I EE I       |                        |        | ADDILITES                     |                        |
| AMENDMENT C   |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                                       | HIGH<br>NUM<br>PREVI                 | HEST<br>MBER<br>HOUSLY<br>D FOR | PRESENT<br>EXTRA | RATE                | ADDI-<br>TIONAL<br>FEE |        | RATE                          | ADDI-<br>TIONAL<br>FEE |
|   | Total  |   | Minus                                 | **                                   |                                 | =                | X\$ 9=              |                        | OR     | X\$18=                        |                        |
|   | Independent                                    | *   | Minus                                 | ***                                  | 2: 4114                         | =                | X42=                |                        | OR     | X84=                          |                        |
| L   | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |   |                                       |                                      |                                 |                  | +140=               |                        | OR     | +280=                         |                        |
| * If the entry in column 1 is less than the entry in column 2, write "0" in column 3.   |  |   |                                       |                                      |                                 |                  |                     |                        |        | TOTAL                         |                        |
| ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1. |  |   |                                       |                                      |                                 |                  |                     |                        |        |                               |                        |